MULTIPLE DEPENDENT CLAIM . FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

and the second s

10/049248

3, 17 Suparriedos

APPLICANT(S)

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AFTER AFTER
1st AMENDMENT 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. PEP. · i ' . 3 . . 4 : .5 81 6 7 .. 381 8. 9. 001 grai 10 11 12 13 14 15 16 17 18 19 20 21 1.36 22 23 .`4 25 26 27 28 29 30 31 -∴2 23 35 35 00 39 40 41 40 43 44 4 U 4. 45 43 50 TOTAL TOTAL TO: L PTO-1350 (3-78)